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FILED
May 08 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000084883 (3)

1. Corporation Name

ACCOUNT RESOLUTION CORPORATION

Principal Place of Business

1525 NW 167TH STREET
SUITE 300
MIAMI FL 33169

Mailing Address

1525 NW 167TH STREET
SUITE 300
MIAMI FL 33169

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/15/1996

4. FEI Number 65-0722199

APPLIED FOR

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

BENNETT, JOSH N ESQ.
200 S. BISCAYNE BLVD
SUITE 1050
MIAMI FL 33133

10. Name and Address of New Registered Agent

81 Name Bennett Josh N. ESQ.
82 Street Address (P.O. Box Number is Not Acceptable)
NationsBank Tower
83 100 S.E. Second Street, Suite 2600
84 City Miami FL 85 Zip Code 33131

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME OVERS, MICHAEL
STREET ADDRESS 1525 NW 167TH ST, STE 300
CITY-ST-ZIP MIAMI FL 33169 ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ☐ Change ☒ Addition
1.2 NAME Perlman, Jason
1.3 STREET ADDRESS 1525 NW 167th Street, Ste 300
1.4 CITY-ST-ZIP Miami, FL 33169

2.1 TITLE V ☐ Change ☒ Addition
2.2 NAME Bonser, Todd
2.3 STREET ADDRESS 1525 NW 167th Street, Ste 300
2.4 CITY-ST-ZIP Miami, FL 33169

3.1 TITLE S ☐ Change ☒ Addition
3.2 NAME Turner, Paul
3.3 STREET ADDRESS 1525 NW 167th Street, Ste 300
3.4 CITY-ST-ZIP Miami, FL 33169

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Paul Turner

4-29-98

(205) 674-1111

CP2E034 (10/97)